Virginia State Board of Elections

Commonwealth of Virginia

Statement of Organization
CANDIDATE COMMITTEE

*Please read instructions before completing this form

Type of Statement

☒ NEW	☐ AMENDED
This committee is registering with the Virginia State Board of Elections for the first time.	This committee is filing an amended Statement of Organization.

	Date Changes Took Effect	SBE-issued Committee ID

Committee Information

Committee Information	
Name of Candidate Campaign Committee	Friends of Rawlings for School Board
Street Address/PO Box — 327 Wesmond Drive	Suite #
City — Alexandria	State — Virginia Zip Code — 22305
Email Address — truefamilylove@yahoo.com	Daytime Phone # — 571 501 1946
Campaign Website	

Candidate Information

Candidate Information	
Salutation Last Name — Rawlings	First Name — Joyce Middle Name — Diane Suffix
Residence Address — 327 Wesmond Drive	Apt #
City — Alexandria	State — Virginia Zip Code — 22305
County or City of Residence	Voter Identification #
Email Address — truefamilylove@yahoo.com	Daytime Phone # — 571 501 1946

☐ By checking this box, I certify that I am currently registered to vote at the address above.

Election Information

Election Information	
Office Sought — School Board	District (if one) — A
Political Party — Democratic	Year of Election — 2012 ☒ November ☐ May ☐ Special Type of Election

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CANDIDATE COMMITTEE

Treasurer Information				
Treasurer Information	_Rawlings_	_Joyce_	_Diane_	
	Salutation Last Name	First Name	Middle Name	Suffix
	327 Wesmond Drive		Apt #	
	Residence Address			
	Alexandria	_Virginia_		_22305_
	City	State		Zip Code
	Alexandria			
	County or City of Residence		Voter Identification #	
	true family love @ yahoo.com		_5715011946_	
	Email Address		Daytime Phone #	
	☐ By checking this box, I certify that I am currently registered to vote at the address above.			

Campaign Depository			
Sun Trust		_N/A_	
Name of Primary Financial Institution		Name of Other Financial Institution (if applicable)	
Alexandria, Virginia			
City	State	City	State

Committee Activity	
Dates of Activity	Please provide the following dates. (If an action has not yet occurred for this committee, write "N/A")
	Date first contribution accepted: _N/A_
	Date first expenditure made: _N/A_
	Date campaign depository designated: _____
	Date filing fee paid for party nomination: _N/A_
	Date Statement of Qualification filed: _6/11/12_
	Date treasurer appointed: _6/11/12_

(continued on next page)

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Filing Method	
Filing Method	Please indicate the method by which this committee will submit all required campaign finance reports: ☐ File electronically using **SBE's Electronic Filing Application**. ☐ File electronically using an **SBE Approved Vendor** (Please indicate Name of Vendor:) _____ ☑ File paper reports. _Joyce D. Rawlins_ Signature Date __6/11/12__

Signatures	
Candidate's Signature	I affirm that, to the best of my knowledge, all of the information on this form is complete and truthful. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the _Code of Virginia_). I also understand that my Treasurer and I must truthfully report, in a timely manner, all monies and things of value which this campaign committee receives or expends. Civil penalties shall be assessed for late or un-filed reports in the manner required by the _Code of Virginia_. I further understand that if I do not appoint a treasurer, or if at any time the treasurer's position is vacant, that I, as the candidate, will assume and accept all of the Treasurer's duties until the position is filled. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony. _Joyce D. Rawlins_ Candidate's Signature Date __6/11/12__
Treasurer's Signature	I accept the appointment of Treasurer of this campaign committee. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the _Code of Virginia_). I understand that I must truthfully report all monies and things of value which this campaign committee receives or expends in a timely manner. Civil penalties will be assessed in the manner required by the _Code of Virginia_ for late or non-filed reports. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony. _Joyce D. Rawlins_ Treasurer's Signature Date __6/11/12__